

REGISTRATION FORM
HIV BIOMEDICAL UPDATE on HIV/AIDS, STDs and Hepatitis
DATE: Thursday, November 8, 2012, 2:30 - 4 p.m.

School/Agency: _____

School Administrative Unit: _____

Complete Address: _____

Phone: _____ Fax: _____

Name #1: _____

Position: _____

E-mail: _____

Name #2: _____

Position: _____

E-mail: _____

Please fax form to Jody Leary at 624-6702 or mail registration to: Attn: Jody Leary, HIV Prevention Education Program, Maine Department of Education, 23 State House Station, Augusta, ME 04333-0023. Questions: Call Jody at 624-6692 or e-mail: jody.leary@maine.gov.

What do you want to learn more about from the session? (check all that apply):

- ☐ HIV transmission
- ☐ Latest treatments
- ☐ Emerging issues
- ☐ Prevention education
- ☐ Demographics of persons living with HIV and AIDS
- ☐ Current rates of HIV and AIDS in Maine
- ☐ Hear a personal story from a person living with HIV or AIDS
- ☐ Other (please specify): _____